



# HETI CONTINUING PROFESSIONAL DEVELOPMENT (CPD) HOME COMPLIANCE AND AUDIT POLICY

# 1 INTRODUCTION

Medical practitioners in Australia and New Zealand (NZ) are required to complete a minimum of 50 hours of continuing Professional Development (CPD) each calendar year, according to standards set out by the Medical Board of Australia (MBA).

The HETI CPD Home provides resources, advice and a CPD activity platform to help its members plan, record, conduct and reflect on their annual CPD activity.

# 2 PURPOSE

CPD Programs must have a process to audit at least 5% of its members' CPD records annually. The purpose of the audit is to:

- Ensure that the quality of CPD activities is adequate
- Ensure records are complete and up to date
- Inform any future improvements to the CPD program via thematic or trend analysis

This policy outlines the compliance requirements and audit management that will assure regulators and the public that members are being held accountable to a high standard of professional practice.

# 3 SCOPE

This policy:

- Sets out the minimum requirements for members to comply with the HETI CPD program
- Provides details for complying with any requests for an audit of their records and indicates where members may not be compliant
- Describes actions that HETI may take against non-compliant members
- Outlines the method by which audits are conducted
- Provides a referral for members to access the reconsideration, reviews and appeals policy for audit decisions
- Outlines the commitment to report audit outcomes to regulators and HETI leadership (for continuous quality improvement)

# 4 COMPLIANCE POLICY

HETI mandates that members must complete a minimum of 50 hours of continuing Professional Development each calendar year with set requirements within the domains





of educational activities, reviewing performance and measuring outcomes. This aligns with the standards set out by the Medical Board of Australia.

Members will be expected to plan (using a Professional Development Plan), conduct, and log activity relevant to their scope of practice using the HETI CPD Home Handbook as a guide.

HETI recognises that members may not be conducting CPD activities on a pro-rata basis – i.e., activity volumes will vary throughout the year and members may not enter activities at the time of the event. However, HETI will monitor the CPD program records regularly and communicate with members identified as at risk of non-compliance prior to the end of the calendar year.

Any exemptions or variations to the program are approved in accordance with the HETI CPD Home Exemptions and Variations document.

Members should retain substantiating evidence in case of HETI or MBA audit for at least 3 years if they are not providing/uploading these to the HETI CPD Home portal.

# **5 COMPLIANCE**

#### 5.1 PROFESSIONAL DEVELOPMENT PLAN

In January of each year, HETI will advise all members to complete their Professional Development Plan (PDP) and enter it as a "Reviewing performance" activity in their log. The communique will offer administrative and clinical assistance if needed by members as they define their goals.

By April of the CPD year, members will be reminded that their PDP should be completed and uploaded onto the CPD Home system. Staff and HETI CPD Home clinical leadership will be available to assist with administrative advice, clinical/ educational guidance, or support requests.

#### 5.2 REMINDERS

- 5.2.1 In July of each year, HETI will check all records to 30 June and communicate a reminder to any Member with less than 50% (25 hours) of their CPD complete for the year.
- 5.2.2 In October of each year, HETI will check all records to 30 September and communicate a reminder to members with less than 75% (37.5 hours) of their CPD activities entered for the year. This communique will include offers of assistance to members to find appropriate resources or activities in any of the core domains of activity in which they need to accumulate hours.
- 5.2.3 From November, HETI CPD Home will try to contact each member who is not logging sufficient activity via direct email and phone call. The purpose of these calls is to identify any support that HETI can provide the member.
- 5.2.4 In January of each year a final reminder will be sent to members that their log of CPD activities needs to be complete.





5.3.5 Throughout the year, members who are identified as being at risk of non-compliance will be communicated with directly in accordance with the HETI CPD Home Identifying At-Risk Members procedure.

#### 5.3 CONDUCTING THE AUDIT

In February-March of each year, HETI will conduct random audits of 5% of Member CPD records from the year prior. The audit process will be conducted in accordance with the process outlined below (see section 6).

### **5.4 REPORTING REQUIREMENTS**

By June of each year HETI will submit its annual audit report to the AMC. The report will also include program evaluation and a consultation request so that the AMC, MBA and HETI can discuss potential improvements to the program. This may include:

- General trends in CPD activity within the program and across the medical profession
- Trends in CPD non-compliance
- Any apparent trend or system weakness arising from audits or evaluation processes

After the end of each CPD year, HETI will provide compliant members with a statement of completion, including a summary of CPD activities in case the member is audited by the MBA.

# 1 AUDIT

#### **6.1 AUDIT PROCESS**

HETI will audit 5% of all member records annually. A list of all active members will be downloaded from HETI records. Then, 5% of records will be randomly sampled using a random number generator to select from the member's membership ID number field or an excel field with individual numbers assigned to them.

The records of the selected members will be provided to an appropriate member of the HETI CPD Home Council In the case of an actual or potential conflict of interest (e.g. the member is known to the appointee), HETI will allocate an alternative assessor. If the member has a highly specialised field of practice, then HETI may, at its discretion, seek external assistance with the audit.

The audit assessment will consider:

- Substantiating evidence
- Checking hours recorded for each activity and whether they are reasonable for the activity described
- Checking whether total hours meet the minimum registration standard for each domain education, performance, outcomes
- Assessing the nature of the activities and whether they align with the CPD Handbook and the member's scope of practice





- Whether the portfolio addresses competencies described in Good Medical Practice
   cultural safety, addressing health inequities, professionalism, and ethical practice
- Confirming hours approved by any other CPD Home the member may have
- Verifying with the member that any mandatory activities are being done e.g. NSW Health mandatory training modules
- Validating whether the member has completed and reflected on the professional development plan for the year
- Assessing whether an educational activity is of sufficient quality (see the HETI CPD Home Assessment Framework)

If an activity is deemed to be non-compliant or there is insufficient substantiating evidence, then the member may be asked for more information or to undertake remedial action to attain the requisite hours. An individual non-compliant activity may not be counted towards the total hours for the year.

Audits will only be conducted for the first 50 hours of activity, even if Members have recorded more in their records.

#### 6.2 NOTIFYING MEMBERS OF SELECTION FOR AUDIT

Members of the HETI CPD Home who have been randomly selected for audit will be notified via formal letter. The letter will inform them that that they were chosen for the audit and summarise the initial findings as either:

- Compliant: A member will be deemed compliant if a HETI assessor decides that the records, activities, total hours and substantiating evidence meet the requirements of the program.
- Not compliant: If a member is required to provide additional evidence or undertake remedial action, the letter will detail the additional requirements placed on them (see Section 7 for information about continued noncompliance).

#### 6.3 MEMBER RESPONSES TO REQUESTS FOR MORE INFORMATION/ REMEDIAL ACTION

Generally, HETI will expect records or substantiating evidence to be provided within 30 days of the notification of audit. Any time extensions will be granted at HETI's discretion, but time extensions must not conflict with HETI reporting responsibilities to regulators.

Any unsubmitted audit evidence or failure to respond will be considered non-compliant. Action may be taken against members for non-compliance.

A final offer of administrative support and clinical advice and support will be provided to the member. HETI will engage with the member in a constructive way to help the member become compliant by the due date.

## Indicative timeline

Members selected for audit		By 15 February		
Member notified either of	compliant or	not	By 1 March	
compliant				
Not compliant members response due			31 March	





Final reminder email/ phone call Final notification of non-compliance By 21 April By 30 April

#### **6.4 EXEMPTIONS FROM AUDIT**

HETI may exempt a member from audit if the member applies to have special consideration for full or partial exemption from CPD (i.e., illness, extended absence for cultural responsibilities). If granted, then the member is eligible for selection in the audit in the next available year in which the extenuating circumstances do not apply.

Members who cancel their subscription during the year being audited will also be exempted from selection for a HETI CPD Home audit. This will not exempt members from a future Medical Board audit.

#### **6.5 AUDIT OUTCOME**

Members selected for audit will be notified of the outcome of their audit assessment in writing, generally within 28 days of the audit.

If the member is not satisfied with the outcome of an audit finding of non-compliance, then a request for review/ reconsideration can be made to HETI pursuant to the HETI CPD Home Reconsideration, Review and Appeals Policy.

HETI will report on audit and compliance to the relevant regulatory authorities on an annual basis, or as required. It will also retain records of the audit to inform HETI CPD Home evaluations.

# 6 AUDIT NON-COMPLIANCE: CONSEQENCES

The HETI CPD Home expects members to meet the minimum registration requirements for CPD, and the substantiating evidence requirements of the program. Failure to comply following an audit may result in the following actions:

- Direct assistance to help the member comply with registration requirements
- Remedial action by HETI
- Disciplinary action by the Medical Board of Australia

# 7 RESPONSIBILITIES

#### Members will:

- Keep good records of their CPD activity, including substantiating evidence
- Complete their annual CPD requirements by 31 December each year
- Plan their CPD and monitor progress
- Ensure their activities align with their scope of practice and, where appropriate, include development against one or more of the core competencies outlined in the Good Medical Practice code.
- Comply with any audit requests





- Engage with HETI regarding any requested remedial action
- Retain complete records in case they are audited by the MBA or HETI
- Inform HETI if they think they are at risk of non-compliance or if they need any assistance from administration or clinical support staff

#### HETI will:

- Conduct audits in a way that ensures procedural fairness
- Communicate in a constructive way with members i.e., if they are at risk of noncompliance or require special consideration
- Advise and support members where necessary about relevant activities, such as:
  - How to plan their CPD
  - o Education in line with their scope of practice
  - o Performance review
  - Measuring outcomes
  - Core competencies in Good Medical Practice
- Report its audit and compliance findings to the MBA/ AMC
- Use data and feedback to inform changes and improvements to the program
- Consider any appeal or review in a fair and reasonable manner
- Be conscious of and act on any real or perceived conflict of interest
- Take disciplinary action only as a last resort

# 8 CONTACT

For further information please contact HETI CPD Home staff via email. You may be referred to a member of the HETI CPD Home Steering Committee for advice, if appropriate:

Telephone: TBC

Email: HETI-CPDHome@health.nsw.gov.au

# 9 DEFINITIONS

**Audit** means a process of random sampling and assessment used to determine whether individual records are compliant with program requirements. It also serves as a mechanism to identify potential improvements to the program

**HETI** means the NSW Health Education and Training Institute

*Member* means a current financial member of the HETI CPD Home who has met the entry requirements of the program.

**Compliance** means that the CPD Program is making sure that members are meeting their minimum registration requirements for CPD

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